CENTERS FOR MEDICARE & MEDICAID SERVICES CLINICAL LABORATORY IMPROVEMENT AMENDMENTS

CERTIFICATE OF COMPLIANCE

LABORATORY NAME AND ADDRESS

MS PUBLIC HEALTH LABORATORIES

MOLECULAR DIAGNOSTICS DIVISION - LAWSO
3152 LAWSON ST

JACKSON, MS 39213

LABORATORY DIRECTOR

PATRICK KYLE PHD

CLIA ID NUMBER

25D1042876

EFFECTIVE DATE

07/18/2008

EXPIRATION DATE

07/17/2010

Pursuant to Section 353 of the Public Health Services Act (42 U.S.C. 263a) as revised by the Clinical Laboratory Improvement Amendments (CLIA), the above named laboratory located at the address shown hereon (and other approved locations) may accept human specimens for the purposes of performing laboratory examinations or procedures.

This certificate shall be valid until the expiration date above, but is subject to revocation, suspension, limitation, or other sanctions for violation of the Act or the regulations promulgated thereunder.

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Judith A. Yost, Director
Division of Laboratory Services
Survey and Certification Group
Center for Medicaid and State Operations

CIVIS CENTERS TO MEDICARE & MEDICAD SERVICES

If you currently hold a Certificate of Compliance or Certificate of Accreditation, below is a list of the laboratory specialties/subspecialties you are certified to perform and their effective date:

LAB CERTIFICATION (CODE) EFFECTI

EFFECTIVE DATE

LAB CERTIFICATION (CODE)

EFFECTIVE DATE

BACTERIOLOGY (110) VIROLOGY (140)

07/18/2006 07/18/2006

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FOR MORE INFORMATION ABOUT CLIA, VISIT OUR WEBSITE AT WWW.CMS.HHS.GOV/CLIA OR CONTACT YOUR LOCAL STATE AGENCY. PLEASE SEE THE REVERSE FOR YOUR STATE AGENCY'S ADDRESS AND PHONE NUMBER.
PLEASE CONTACT YOUR STATE AGENCY FOR ANY CHANGES TO YOUR CURRENT CERTIFICATE.